

_____ County WV CSP Interview Register

I request a CSP Verification Interview and certify that I have completed the following self assessment tasks. I understand that interviews will be scheduled on an appointment basis after producers have completed the necessary preparation. I further understand that if I do not have the necessary material at the interview the interview will need to be rescheduled.

| # | Date Signed | Name/Signature | Check All Items Complete | | | Interview Scheduled |
|---|-------------|----------------|-------------------------------|-------------------|---|---------------------|
| | | | Assessment Workbook Completed | Records Available | Other West Virginia Checklists Received and Ready | |
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